



CERTIFICATION FOR EXEMPTION FROM E-FILING

IN THE STATE OF ILLINOIS, CIRCUIT COURT

COUNTY: _____

County Where You Are Filing the Case

Enter the case information as it appears on your other court documents.

PLAINTIFF/PETITIONER OR IN RE: _____
Who started the case. First, Middle, and Last Name, or Business Name

DEFENDANTS/RESPONDENTS: _____
Who the case was filed against.

First, Middle, and Last Name, or Business Name

Case Number _____



You are automatically exempt from e-filing and you do not need to file this *Certification* if:

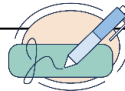
- you are in jail or prison;
- you are filing a will;
- you are filing into a juvenile case; or
- your disability prevents you from e-filing.

1. I am not able to e-file documents in this case because:

Check why you are asking to file by mail, in person, or another way.

- ☐ I do not have a lawyer and at least one of the following statements is true:
- I do not have the Internet or computer access in the home and travel presents a hardship (financial or otherwise);
 - I have trouble reading, writing, or speaking in English, or
 - I tried to e-file my forms, but was not able to complete the process because the equipment or help I need was not available.
- ☐ I am filing a document in a sensitive case, such as a petition for an order of protection or a civil no contact/stalking order.

2. For the reason above, I am entitled to a good cause exemption from e-filing under [Illinois Supreme Court Rule 9\(c\)\(5\)](#).



SIGN

I certify under [735 ILCS 5/1-109](#) that:

- 1) everything in this document is true and correct, or I have been informed or I believe it to be true and correct, and
- 2) I understand that making a false statement on this form is perjury and has penalties provided by law.

If you are filling out this form online, sign your name by typing it. If you are filling out this form by hand, sign and print your name.

Your Signature /s/ _____ Print Your Name _____

Your Phone Number _____ Attorney Number (if any) _____

Your Email (if you have one) _____

Your Address _____

Street, Apt. #

City

State

Zip Code

Be sure to **check your email every day** so you do not miss important information, court dates, or documents from other parties.

This form is approved by the Illinois Supreme Court and is required to be accepted in all Illinois Circuit Courts. Forms are free at ilcourts.info/forms.